Name in Full

Charles H. Banning

Certificate of Death

Died at Town Secretary - County Dorchester MARYLAND

Date 1897 Month 8 Day 14 Age Y. 20 M. 10 D. 29 Native of Dorchester Occupation waterman

Male White ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ ~~Colored~~ Single ~~Widower~~ ~~Number of children living~~

Husband of Wife

Father's Name Wm H. Banning Mother's Name Retta Banning

Cause of Death Primary Drinking whisky & Ginger How long sick 30 hours

Immediate Congestion of the Brain Accident, ~~Suicide, Homicide~~

Reported by Geo P. Jones M.D. 34

Address East New Market Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Brannock Certificate of Death

Brannock

Died at Town Cornhillville County Dorchester MARYLAND

Date 189 9 Month Day Age Y. M. D. Native of Md Occupation —

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ ~~Single~~ ~~Widower~~ ~~Number of children living~~

Husband of Wife

Father's Name Wesley Brannock Mother's Name — Brannock

Cause of Death Primary 82 How long sick 24 hrs.

Immediate Cholera Infantum ~~Accident, Suicide, Homicide~~

Reported by John Ware M.D.

Address Cambridge Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

Charles Loomis Hackett

Died at Town Finchville County Dor MARYLAND

Date 1899 Month Aug Day 30 | Age Y. 5 M. D. | Native of Md | Occupation

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ ~~Number of children living~~

Husband / Wife of

Father's Name Charles H Hackett | Mother's Name Grace Loomis

Cause of Death: Primary Summer complaint | How long sick one week

Immediate

82

~~Accident, Suicide, Homicide~~

Reported by R Kemp Jefferson

Address Federalsburgh Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65068

Name in Full

Certificate of Death

Daniel Maynadier Henry

Died at Town Cambridge County Dorchester MARYLAND

Date 1899 Month Aug. Day 30 | Age Y. 74 M. — D. | Native of Dor. Co | Occupation Sawyer

Male White ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ ~~Colored~~ ~~Single~~ Widower Number of children living 4

Husband of Wife

Father's Name John Campbell Henry Mother's Name Mary Nevette Steele

Cause of Death Primary Acute Bright Disease How long sick 5 days

Immediate Uraemic Coma 96 Accident, Suicide, Homicide

Reported by Guy Steele

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Attended by Dr. .....

of .....

Seen by Coroner .....

of .....

Information contained in this certificate received

from .....

of .....

Name in Full

Francis Jenkins Henry Jr

Certificate of Death

Died at Town: Cambridge County: Dorchester MARYLAND

Date 1894 Month: Aug Day: 5

Age Y. 52 M. 4 D. 5

Native of Dorchester Co Md

Occupation Law clerk

Male ~~Female~~ White ~~Colored~~ ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ ~~Number of children living~~

Husband of

Wife

Father's Name Francis Jenkins Henry

Mother's Name Wilhelmina E. Goldsmith

Cause of Death: Primary Morphine habit 161 — How long sick

Immediate Heart failure — Accident, Suicide, Homicide

Reported by Guy Steele

Address Cambridge Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Attended by Dr. .....

of .....

Seen by Coroner .....

of .....

Information contained in this certificate received

from .....

of .....

Name in Full

Certificate of Death

John Johnson

Died at Town Dorchester County MARYLAND

Date 189 9 Month Aug Day 8 | Age Y. 66 M. D. | Native of Va. | Occupation Farmer

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ | Number of children living 6

Husband of
Wife

Father's Name

Mother's Name

Cause of Death { Primary Bilious Dysentery 84 | Immediate

How long sick 3 weeks

Accident, Suicide, Homicide

Reported by R K Jefferson

Address Adelphi Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 85068

Name In Full

Thomas Kirwan

Certificate of Death

Died at Town Crapo County Dorchester MARYLAND

Date 1899 Month Ag Day 16 Age Y. 72 M. 10 D. 16 Native of Dorchest Occupation farmer

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ Widower ~~Divorced~~ Number of children living 8

Husband of Wife Nancy Kirwan

Father's Name

Mother's Name

Cause of Death Primary Phalisis 44 How long sick 3 yrs

~~Immediate~~ ~~Accident, Suicide~~, Homicide

Reported by W. J. Kirwan

Address Crapo

Must be signed by physician, if any in attendance, otherwise [illegible]roner, undertaker or minister.

OVER

LIBRARY BUREAU, 79898

Attended by Dr. E O P Jones

of Oroville

Seen by Coroner

of

Information contained in this certificate received from

of

Name in Full Same E. LeCompte

Certificate of Death

Died at Town Cambridge County Dorchester MARYLAND

Date 1899 Month August Day 8 | Age Y. 3 M. 2 D. | Native of Cambridge Md | Occupation ——

Male ~~Female~~ White Colored ~~Married~~ Single ~~Widow~~ ~~Widower~~ Divorced

Number of children living 3

Husband of Wife

Father's Name Same E LeCompte

Mother's Name Eliza Spedden

Cause of Death: Primary Marasmus 82 | How long sick Since birth

Immediate Exhaustion

~~Accident, Suicide, Homicide~~

Reported by B W Goldstowne

Address Cambridge Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Roland Seland

Certificate of Death

Died at Town Cambridge County Dorchester MARYLAND

Date 1899 Month Aug Day 11 | Age Y. M. D. 4-15 | Native of Dorchester | Occupation

Male White ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ ~~Colored~~ Single ~~Widower~~ ~~Number of children living~~

Husband of Wife

Father's Name Henry Seland

Mother's Name Mary Virginia Stewart

Cause of Death
- Primary Capillary Bronchitis 71
- Immediate Pulmonary congestion

How long sick

~~Accident, Suicide, Homicide~~

Reported by Guy Steele

Address Cambridge Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or ministar.

LIBRARY BUREAU, 79898

Attended by Dr. .....

of .....

Seen by Coroner .....

of .....

Information contained in this certificate received

from .....

of .....

Name in Full

Certificate of Death

Elsie Maddox

Died at Town Cambridge County Dorchester MARYLAND

Date 1899 Month Aug Day 17 | Age Y. - M. 7 D. - | Native of Dorchester Co | Occupation —

~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

Female Colored ~~Single~~ ~~Widower~~ ~~Number of child-bearing~~

Husband of Wife

Father's Name John Wesley Maddox

Mother's Name Annette Clash

Cause of Death

Primary Capillary Bronchitis 71

Immediate Pulmonary congestion

How long sick 5 days

~~Accident, Suicide, Homicide~~

Reported by Guy Steele

Address Cambridge Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Attended by Dr. .....

of .....

Seen by Coroner .....

of .....

Information contained in this certificate received

from .....

of .....

Name In Full Moor

Certificate of Death

Died at Town Bishops Head County Dorchester MARYLAND

Date 1899 Month Aug Day 21 Age Y. M. D. 3 weeks Native of Occupation

Male White Married Widow Divorced

Female Colored Single Widower Number of children living

Husband of Wife

Father's Name Timothy Moor Mother's Name Ellen Moor

Cause of Death: Primary How long sick

Immediate Accident, Suicide, Homicide

1-9/1900

Reported by D. J. Kinna

Address Crapo

OVER

Must be signed by physicien, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 79888

Attended by Dr. E A P Jones

of Crapo

Seen by Coroner

of

P.C.I. 121

Information contained in this certificate

ceived from

of

Name in Full

Certificate of Death

Rosa L. Sampson

Died at Town New Market County Dorchester MARYLAND

Date 1899 Month 8 Day 17 Age Y. 13 M. 0 D. 2 Native of Dorchester Occupation —

~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

Female Colored Single ~~Widower~~ ~~Number of children living~~

Husband ~~of~~

Wife

Father's Name John Wesley Sampson

Mother's Name Sarah Jane Sampson

Cause of Death Primary Typhoid fever — 1

Immediate Anemia

How long sick 4 weeks

~~Accident, Suicide, Homicide~~

Reported by Geo P Jones MD

Address East New Market Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65669

Name In Full E C Slacum

Certificate of Death

Died at Town Lakesville County Dor MARYLAND

Date 1899 Month 8 Day 6 Age Y. 8 M. 2 D. 1 Native of Md Occupation Non

Male White ~~Married~~ Widow Divorced

~~Female~~ ~~Colored~~ Single Widower Number of children living

Husband of Wife

Father's Name J. D. Slacum Mother's Name J. J. Slacum

Cause of Death Primary Typhoid fever How long sick

Immediate Accident, Suicide, Homicide

Reported by A. J. Farwan

Address Crapo

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

OVER

LIBRARY BUREAU, 79898

Attended by Dr. E D P Jones

of Draper

Seen by Coroner

of

Information contained in this certificate received from

of

Name in Full — Certificate of Death

Susie E Stewart

Died at — Town: Cambridge — County: Dorchester — MARYLAND

Date 1899 — Month: Aug — Day: 6 — Age: Y. 46 M. D. — Native of: Dorchester Co — Occupation: Housewife

~~Male~~ / Female — White / ~~Colored~~ — Married / ~~Single~~ — ~~Widow~~ / Widower — ~~Divorced~~ — Number of children living: 1

Husband / Wife of: Jas A Stewart

Father's Name: Wm Billups — Mother's Name: Mary Billups

Cause of Death — Primary: Typhoid Fever — How long sick: 1

Immediate: Congestion of Brain

~~Accident, Suicide, Homicide~~

Reported by: P W Goldstrom

Address: Cambridge Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name In Full

Certificate of Death

Willie Anne Stewart

Died at Town Crawbridge County Dorchester MARYLAND

Date 1899 Month 8 Day 10 | Age Y. 50 M. 0 D. - | Native of Md. | Occupation H. Wife

~~Male~~ ~~White~~ Married ~~Widow~~ Divorced

Female Colored ~~Single~~ — ~~Widower~~ Number of children living 4

~~Husband~~ Wife of Sandy Stewart

Father's Name Sweet Known

Mother's Name Cant bear her Name

Cause of Death: ~~Rem~~ Paralysis 44

Immediate Yes

~~How long sick~~ ~~[illegible]~~ 1 day

~~Accident, Suicide, Homicide~~

Reported by Dr. A. Sayers

Address Salem Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898

Name in Full: Jas. L. Wheatley

Certificate of Death

Died at: Town: Hudson County: Lw MARYLAND

Date 189 9 Month: Aug Day: 6 | Age Y.: — M.: — D.: 19 | Native of: Dor. Co | Occupation: Infant

Male ~~Female~~ White ~~Colored~~ ~~Married~~ ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ ~~Number of children living~~

Husband of Wife

Father's Name: Thos. N Wheatley

Mother's Name: Mollie Wheatley

Cause of Death: Primary: Indigestion 82 | Immediate: Marasmus

How long sick: 19 days

Accident, Suicide, Homicide

Reported by: S A Stokes M.D.

Address: Cornersville Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

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